

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | | |
|--|------------------------|--------------------------|-----------------|
| Substitute for form 1449B/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary) | | Complete if Known | |
| | | Application Number | Not yet known |
| | | Filing Date | Herewith |
| | | First Named Inventor | GUCHHAIT, Atanu |
| | | Group Art Unit | Not yet known |
| Examiner Name | Not yet known | | |
| Sheet 1 of 1 | Attorney Docket Number | P-5749-US | |

| OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS | | | |
|---|-----------------------|---|--------------------------|
| Examiner Initials* | Cite No. ¹ | Include name of the author (in CAPITAL LETTERS), title of the article (where appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. | T ² |
| /KTI/ | AA | R. HAMLA et al., "Novel Technique for Closely-Spaced Multipath Delay Estimation in DS-CDMA Systems", Submitted to Signal Processing Journal (EURASIP), May 2001, http://www.eas.ut.tu-berlin.de/~richa/Richa_Hamla_PhD_TUT.pdf , Publication 7, pp. 125-144 | <input type="checkbox"/> |
| | | | <input type="checkbox"/> |
| | | | <input type="checkbox"/> |
| | | | <input type="checkbox"/> |
| | | | <input type="checkbox"/> |

| | | | |
|--------------------|-------|-----------------|------------|
| Examiner Signature | /KTI/ | Date Considered | 04/13/2007 |
|--------------------|-------|-----------------|------------|

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 608. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.